

FALLS CHURCH, VIRGINIA 22041



COMBINED DECLARATION AND POWER OF ATTORNEY IN ORIGINAL APPLICATION

ATTORNEY

DOCKET

BHT-3092-233

As a below named inventor, I hereby declare that: Bill KWONG

My residence, pose office address and citizenship are as stated below next to my name.

I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)of the subject matter which is claimed and for which a patent is sought on the invention entitled UNIVERSAL STORAGE INTERFACE BUS the specification of which (check one) X is attached hereto. was filed on as Application Serial No. and with amendments through (if applicable) I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims. <u> []</u> I acknowledge the duty to disclose information which may be material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Sections 1.56. . 4 --. .,= I hereby claim foreign priority benefits under Title 35, United States Code, Sections 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed. EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED WITHIN 12 MONTHS PRIOR TO THIS APPLICATION Date of Filing Date of Issue **Priority Claimed** Country Application No. Day/Month/Year Day/Month/Year YES NO ALL FOREIGN APPLICATION(S), IF ANY, FILED MORE THAN 12 MONTHS PRIOR TO THIS APPLICATION POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the United States Patent and Trademark Office in connection herewith: David E. Dougherty Registration No. 19,576 and Bruce H. Troxell Registration No. 26,592 Send Correspondence To: Direct Telephone Calls To: (name and telephone number) Dougherty & Troxell ONE SKYLINE PLACE Bruce H. Troxell 5205 LEESBURG PIKE, SUITE 1404 703-575-2711

I hereby declare that all statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issue thereon.

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Full Name of Fourth Inventor	Inventor's Signature	Date
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Post Office Address		

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	or Patent			 ,		_Docket No. <u>BHT-309</u> 2-
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For:	CIVIVE	SIGAL STORAGE	ENTERFACE BUS			
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grant, invent	, convey o	or license, any right 37 CFR 1.9(c) if the	s in the invention to at person had made to	o any person whe	o could not be classi	ontract or law to assign, ified as an independent a would not qualify as a
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